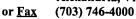
PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450



NSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where

appropriate. All further comindicated unless corrected b maintenance fee notification	elow or directed otherwise	in Block 1, by (a) specifying	a new correspondence address;	vill be mailed to the current and/or (b) indicating a sep	arate "FEE ADDRESS" for
CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1) 7590 06/03/2004			Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.		
Catherine Anne V Proprietary Rights I P.O. Box 220		PE VOICE	Cet I hereby certify that the States Postal Service v addressed to the Mai	rtificate of Mailing or Tran his Fee(s) Transmittal is bein with sufficient postage for fit 1_Stop ISSUE FEE address	smission g deposited with the United states and in an envelope s above, or being facsimile
Tolar, TX 76476	\	8 0 1 E	transmitted to the USP	TO, on the date indicated be	low.
ustment date: 09/09/20 08/2004 EABUBAK2 00000	174 TO7648A1		ATHERING	F HUNE WHA	(Depositor's name) (Signature)
FC:1503	-640.00 DPC	ENT & TRADER	A SUPPLIN	cow 5, 2a	(Signature)
FC 18001	-3.00 OP -12.00 OP		X CAXPUU	weg mus	viciony,
APPLICATION NO.	FILING DATE		ED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/764,881 TITLE OF INVENTION: CI	01/26/2004 HRYSANTHEMUM PLAN	Mark / T NAMED 'FESTIVE YOURS	A. Smith SULA'		1854
APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	МО	\$640	\$0	\$640	09/03/2004
EXAM	INER	ART UNIT	CLASS-SUBCLASS		
PARA, AN	NETTE H	1661	PLT-287000	-	
Address form PTO/SB/12 "Fee Address" indication PTO/SB/47; Rev 03-02 on Number is required. 3. ASSIGNEE NAME AND PLEASE NOTE: Unless been previously submitted (A) NAME OF ASSIGNE AND PLEASE NOTE: Unless been previously submitted (A) NAME OF ASSIGNE AND PLEASE NOTE: Unless been previously submitted (A) NAME OF ASSIGNE AND PLEASE NOTE: Unless been previously submitted (A) NAME OF ASSIGNED AND PLEASE NAME AND PLEASE NAM	ence address (or Change of	names o agents O firm (havagent) are attorneys will be proposed by the propose	Tr (print or type) car on the patent. Inclusion of as Completion of this form is NOT CE: (CITY and STATE OR COL BERTON, OHL patent); □ individual	storneys or of a single attorney or 2 cred patent d, no name 3 signee data is only appropria a substitute for filing an assuntry) Orporation or other private g closed. is attached.	roup entity
		Deposit Ac	o re-apply any previously paid is	(enclose an extra c	copy of this form).
(Authorized Signature)	Aug liberal	(Datc) 9/13	64 09/09/2004	EABUBAKS 00000005 10.	764881
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other than the applicant; a interest as shown by the rec	a/registered attorney or agreement of the United States Of	will not be accepted from int; or the assignee or other tent and Trademark Office.	anyone 01 FC:1503 party in 02 FC:8003	EABUBAR 200000174 10	15.00 OP